

# Safe and Well Visit Referral

Please email completed form to [homesafety.centre@wmfs.net](mailto:homesafety.centre@wmfs.net) | [homesafety.centre@wmfs.cjsm.net](mailto:homesafety.centre@wmfs.cjsm.net) (Secure Email)  
or telephone **0800 389 5525**

## Referrer's details

Member ID

Name: \_\_\_\_\_ Organisation: \_\_\_\_\_  
Phone number: \_\_\_\_\_ Email: \_\_\_\_\_  
Job role or relationship to occupier: \_\_\_\_\_  
Is a joint visit required? Yes  No  If yes, preferred days / times: \_\_\_\_\_

## About the referred person and their home

Name: \_\_\_\_\_ Title: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

Address: \_\_\_\_\_

Postcode: \_\_\_\_\_ Telephone: \_\_\_\_\_

Is the property: Owner Occupied?  Rented?  (please tick)

Are there any working smoke alarms in the property? Yes  No

Is the occupier, or anyone else who lives in their home:

Deaf or very hard of hearing?	Yes <input type="checkbox"/>	No <input type="checkbox"/>
Living alone?	Yes <input type="checkbox"/>	No <input type="checkbox"/>
A single parent with children under 18 years?	Yes <input type="checkbox"/>	No <input type="checkbox"/>
Of working age but unemployed for more than 1 year?	Yes <input type="checkbox"/>	No <input type="checkbox"/>
A smoker?	Yes <input type="checkbox"/>	No <input type="checkbox"/>
Unable to mobilise or escape quickly in an emergency?	Yes <input type="checkbox"/>	No <input type="checkbox"/>
A regular user of alcohol or other substances?	Yes <input type="checkbox"/>	No <input type="checkbox"/>
A user of medical oxygen?	Yes <input type="checkbox"/>	No <input type="checkbox"/>

We will contact the occupier to arrange a suitable date and time for our visit. If these arrangements need to be made via yourself or a third party, please indicate below:

Contact via referrer  or Name: \_\_\_\_\_ Tel: \_\_\_\_\_

Please indicate the days and times when the occupier (or nominated contact) is usually available:

	Mon	Tue	Wed	Thur	Fri	Sat	Sun
Morning							
Afternoon							
Evening							

Additional Comments:

The information that you have provided will be used by West Midlands Fire Service to contact the occupier or nominated contact to arrange a Safe and Well visit. The Safe and Well visit aims to reduce the risk to fire and other incidents. Our full privacy statement will be provided at our visit and can be found at [www.wmfs.net](http://www.wmfs.net).

**WEST MIDLANDS FIRE SERVICE**

Making the West Midlands Safer, Stronger and Healthier

[www.wmfs.net](http://www.wmfs.net)

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